

CONFIDENTIAL

1. SURVEY	2						
PSU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
BLOCK	<input type="checkbox"/>						
DWELLING	<input type="checkbox"/>						
HOUSEHOLD	<input type="checkbox"/>						
PERSON	<input type="checkbox"/>						
2. SEX	Male	<input type="checkbox"/>	1				
	Female	<input type="checkbox"/>	2				
3. AGE	Years	<input type="checkbox"/> <input type="checkbox"/>					
4. S.D. ONLY –							
Institutionalised person <i>(No more questions)</i>	<input type="checkbox"/>	1					
Boarding school pupil selected at S.D. <i>(No more questions)</i>	<input type="checkbox"/>	2					
5. <u>Interviewer</u> :							
Personal interview must be obtained.							
Personal interview obtained, go to Q.6	<input type="checkbox"/>						
Personal interview NOT obtained, no more questions	<input type="checkbox"/>						
6. <u>Sequence Guide</u>							
. If 65 or over, go to Q.76, page 6	<input type="checkbox"/>	1					
. If still attending school (Col. H on HF/SDF), go to Q.9	<input type="checkbox"/>	2					
. If left school in 1979 (Col. H on HF/SDF), go to Q.8	<input type="checkbox"/>	3					
. If left school in Oct/Nov/Dec 1978 (Col H on HF/SDF), go to Q.33, page 3 ..	<input type="checkbox"/>	4					
. If left school in July/Aug/Sept 1978 (Col. H on HF/SDF), go to Q.33, page 3 ..	<input type="checkbox"/>	5					
. Otherwise, go to Q.33, page 3	<input type="checkbox"/>	6					
7. <u>OFFICE USE ONLY</u>							
Response	A	B	C	D	<input type="checkbox"/>	<input type="checkbox"/>	
Column J					J	<input type="checkbox"/>	
Relationship					L	<input type="checkbox"/>	<input type="checkbox"/>
Family Coding	M	N	O	P	<input type="checkbox"/>	<input type="checkbox"/>	



<p>8. DID YOU LEAVE SCHOOL BEFORE AUGUST THIS YEAR?</p> <p>Yes (Go to Q.33) ... <input type="checkbox"/> 1 No ... <input type="checkbox"/> 2</p>	<p>13. WHAT YEAR, GRADE OR FORM WERE YOU IN AT THAT TIME?</p> <table border="1"> <thead> <tr> <th><u>Form</u></th> <th><u>Year/Grade</u></th> </tr> </thead> <tbody> <tr><td>5</td><td>... 12</td></tr> <tr><td>4</td><td>... 11</td></tr> <tr><td>3</td><td>... 10</td></tr> <tr><td>2</td><td>... 9</td></tr> <tr><td>1</td><td>... 8</td></tr> <tr><td colspan="2">At primary or ungraded (No more questions) <input type="checkbox"/> 6</td></tr> </tbody> </table>	<u>Form</u>	<u>Year/Grade</u>	5	... 12	4	... 11	3	... 10	2	... 9	1	... 8	At primary or ungraded (No more questions) <input type="checkbox"/> 6		<p>20. FROM THE GROUPS ON THE CARD WHICH TYPE OF SCHOOL DID YOU ATTEND -</p> <ul style="list-style-type: none"> → IN (FORM 4 / YEAR 11)? (a) <input type="checkbox"/> → IN (FORM 3 / YEAR 10)? (b) <input type="checkbox"/> → IN (FORM 2 / YEAR 9)? (c) <input type="checkbox"/> → IN (FORM 1 / YEAR 8)? (d) <input type="checkbox"/> 		
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4	... 11																	
3	... 10																	
2	... 9																	
1	... 8																	
At primary or ungraded (No more questions) <input type="checkbox"/> 6																		
<p>9. IN AUGUST THIS YEAR WERE YOU ATTENDING SCHOOL IN (State/Territory)?</p> <p>Yes : in NSW, Victoria, Tasmania, ACT (Go to Q.11) ... <input type="checkbox"/> 1 Yes : in Queensland, SA, WA or NT (Go to Q.13) ... <input type="checkbox"/> 2 No ... <input type="checkbox"/> 3</p>	<p>14. Interviewer : Show Prompt Card 1A - PINK:-</p> <p>HERE IS A CARD SHOWING THE DIFFERENT TYPES OF SCHOOLS.</p> <p>WHICH TYPE DID YOU ATTEND IN AUGUST THIS YEAR?</p> <table border="1"> <tbody> <tr><td>Overseas (No more questions) <input type="checkbox"/> 1</td></tr> <tr><td>Government/State ... <input type="checkbox"/> 2</td></tr> <tr><td>Roman Catholic ... <input type="checkbox"/> 3</td></tr> <tr><td>Other ... <input type="checkbox"/> 4</td></tr> </tbody> </table>	Overseas (No more questions) <input type="checkbox"/> 1	Government/State ... <input type="checkbox"/> 2	Roman Catholic ... <input type="checkbox"/> 3	Other ... <input type="checkbox"/> 4	<p>21. Interviewer : Show Prompt Card 1A - PINK:-</p> <p>WHICH TYPE OF PRIMARY SCHOOL DID YOU LAST ATTEND?</p> <table border="1"> <tbody> <tr><td>Overseas ... <input type="checkbox"/> 1</td></tr> <tr><td>Government/State ... <input type="checkbox"/> 2</td></tr> <tr><td>Roman Catholic ... <input type="checkbox"/> 3</td></tr> <tr><td>Other ... <input type="checkbox"/> 4</td></tr> </tbody> </table>	Overseas ... <input type="checkbox"/> 1	Government/State ... <input type="checkbox"/> 2	Roman Catholic ... <input type="checkbox"/> 3	Other ... <input type="checkbox"/> 4								
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Other ... <input type="checkbox"/> 4																		
<p>10. IN WHICH STATE WERE YOU ATTENDING SCHOOL IN AUGUST THIS YEAR?</p> <p>NSW ... <input type="checkbox"/> 1 Victoria ... <input type="checkbox"/> 2 Tasmania ... <input type="checkbox"/> 3 ACT ... <input type="checkbox"/> 4 Queensland (Go to Q.13) <input type="checkbox"/> 5 SA (Go to Q.13) ... <input type="checkbox"/> 6 WA (Go to Q.13) ... <input type="checkbox"/> 7 NT (Go to Q.13) ... <input type="checkbox"/> 8 Overseas (No more questions) ... <input type="checkbox"/> 9</p>	<p>15. Sequence Guide :</p> <ul style="list-style-type: none"> . If in form 1 (Q.11 or Q.13), go to Q.21 ... <input type="radio"/> . If attended school in NSW, Victoria, Tasmania or ACT, go to Q.16 ... <input type="radio"/> . Otherwise, go to Q.19 ... <input type="radio"/> 	<p>22. Sequence Guide :</p> <ul style="list-style-type: none"> . If in year 12 (Q.11 or Q.13), go to Q.28C ... <input type="radio"/> . If 2 in Q.8, go to Q.23 ... <input type="radio"/> . If in year 9, 10 or 11 (Q.11 or Q.13), go to Q.24 ... <input type="radio"/> . If in year 7 or 8 (Q.11 or Q.13), no more questions ... <input type="radio"/> 																
<p>11. WHAT YEAR OR FORM WERE YOU IN AT THAT TIME?</p> <table border="1"> <thead> <tr> <th><u>Form</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr><td>6</td><td>... 12</td></tr> <tr><td>5</td><td>... 11</td></tr> <tr><td>4</td><td>... 10</td></tr> <tr><td>3</td><td>... 9</td></tr> <tr><td>2</td><td>... 8</td></tr> <tr><td>1</td><td>... 7</td></tr> <tr><td colspan="2">At primary or ungraded (No more questions) <input type="checkbox"/> 7</td></tr> </tbody> </table> <p>12. Go to Q.14</p>	<u>Form</u>	<u>Year</u>	6	... 12	5	... 11	4	... 10	3	... 9	2	... 8	1	... 7	At primary or ungraded (No more questions) <input type="checkbox"/> 7		<p>16. HAVE YOU EVER ATTENDED ANY OTHER TYPE OF SECONDARY SCHOOL?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.21) ... <input type="checkbox"/> 2</p> <p>17. FROM THE GROUPS ON THE CARD WHICH TYPE OF SCHOOL DID YOU ATTEND -</p> <ul style="list-style-type: none"> → IN (FORM 5/YEAR 11)? (a) <input type="checkbox"/> → IN (FORM 4 / YEAR 10)? (b) <input type="checkbox"/> → IN (FORM 3 / YEAR 9)? (c) <input type="checkbox"/> → IN (FORM 2 / YEAR 8)? (d) <input type="checkbox"/> → IN (FORM 1 / YEAR 7)? (e) <input type="checkbox"/> <p>18. Go to Q.21</p> <p>19. HAVE YOU EVER ATTENDED ANY OTHER TYPE OF SECONDARY SCHOOL?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.21) ... <input type="checkbox"/> 2</p>	<p>23. DO YOU INTEND TO RETURN TO SCHOOL NEXT YEAR?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.28B) ... <input type="checkbox"/> 2 Don't know/depends (No more questions) ... <input type="checkbox"/> 3</p> <p>24. Sequence Guide :</p> <ul style="list-style-type: none"> . If attended school in NSW, Victoria, Tasmania or ACT, go to Q.25 ... <input type="radio"/> . Otherwise, go to Q.27 ... <input type="radio"/>
<u>Form</u>	<u>Year</u>																	
6	... 12																	
5	... 11																	
4	... 10																	
3	... 9																	
2	... 8																	
1	... 7																	
At primary or ungraded (No more questions) <input type="checkbox"/> 7																		

25. AT SCHOOL, WHAT IS THE <u>HIGHEST</u> YEAR OR FORM YOU INTEND TO COMPLETE?	29. DO YOU <u>EVER</u> INTEND TO START ANY COURSE OF STUDY?	33. HOW OLD WERE YOU WHEN YOU <u>FIRST</u> LEFT SCHOOL?
<u>Form</u> <u>Year</u>		Age (Specify) ...
6 12 ..	Yes (Go to Q.31) ...	<input type="checkbox"/> 1
5 11 ..	No (No more questions) ...	<input type="checkbox"/> 2
4 10 ..	Don't know/unsure (No more questions) ...	<input type="checkbox"/> 3
3 9 ..		
Don't know/ unsure (No more questions)		<input type="checkbox"/> 5
26. Go to Q.28A	30A. Interviewer : Show Prompt Card 3 - WHITE:-	34. IN WHICH STATE DID YOU <u>FINISH</u> THAT YEAR OF SCHOOL?
27. AT SCHOOL, WHAT IS THE <u>HIGHEST</u> YEAR, GRADE OR FORM YOU INTEND TO COMPLETE?	30B. Interviewer : Show Prompt Card 4 - GREEN:- HERE IS A LIST OF <u>SOME</u> FIELDS OF STUDY. WHICH OF THESE GROUPS BEST DESCRIBES THE <u>MAIN</u> FIELD OF STUDY WHICH YOU INTEND TO START THEN?	NSW
<u>Form</u> <u>Year/Grade</u>		<input type="checkbox"/> 1
5 12 ..	Record code ..	<input type="checkbox"/> 2
4 11 ..	Don't know/none of these (Specify) -----	<input type="checkbox"/> 3
3 10 ..		<input type="checkbox"/> 4
2 9 ..		<input type="checkbox"/> 5
Don't know/ unsure (No more questions)		<input type="checkbox"/> 99
28A. Interviewer : Show Prompt Card 2A - BLUE:- HERE IS A LIST OF SOME THINGS YOU COULD DO WHEN YOU FINISH SCHOOL. IF YOU PASS (Grade in Q.25/Q.27) WHICH OF THESE BEST DESCRIBES WHAT YOU HOPE TO DO IN THE YEAR AFTER THAT?	31. DO YOU INTEND TO <u>START</u> THIS STUDY AT A TECHNICAL COLLEGE, A COLLEGE OF ADVANCED EDUCATION, UNIVERSITY OR SOME OTHER PLACE?	35. Sequence Guide :
28B. Interviewer : Show Prompt Card 2A - BLUE:- HERE IS A LIST OF SOME THINGS YOU COULD DO NEXT YEAR. WHICH OF THESE BEST DESCRIBES WHAT YOU HOPE TO DO NEXT YEAR?	Technical or Further Edu. College, TAFE ..	If currently less than 25 years old, go to Q.36 .. .
28C. Interviewer : Show Prompt Card 2A - BLUE:- HERE IS A LIST OF SOME THINGS YOU COULD DO NEXT YEAR. (IF YOU SUCCESSFULLY COMPLETE SCHOOL THIS YEAR) WHICH OF THESE BEST DESCRIBES WHAT YOU HOPE TO DO NEXT YEAR? Apprenticeship (Go to Q.30A) ..	<input type="checkbox"/> 1	. Otherwise, go to Q.40
Full time study (Go to Q.30B) ..	<input type="checkbox"/> 2	
Work and part-time study (Go to Q.30B) ..	<input type="checkbox"/> 3	
Work and no study (Go to Q.29) ..	<input type="checkbox"/> 4	
Something else (Go to Q.29)	<input type="checkbox"/> 5	
Don't know (No more questions)	<input type="checkbox"/> 6	
36. WHAT WAS THE YEAR OR FORM YOU ATTENDED AT THAT TIME?	Form Year	
6 12 .. .	<input type="checkbox"/> 1	
5 11 .. .	<input type="checkbox"/> 2	
4 10 .. .	<input type="checkbox"/> 3	
3 9 .. .	<input type="checkbox"/> 4	
2 8 .. .	<input type="checkbox"/> 5	
1 7 .. .	<input type="checkbox"/> 6	
Primary or ungraded .. .	<input type="checkbox"/> 7	
37. Go to Q.40		

<p>38. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If currently less than 25 years old, go to Q.39 .. . Otherwise, go to Q.40 .. 	<p>45. FOR HOW MANY YEARS AFTER FIRST LEAVING SCHOOL DID YOU DO FULL-TIME STUDIES?</p> <p>One year or less (Go to Q.47B) .. <input type="checkbox"/> 01</p> <p>Specify years <input type="checkbox"/> <input type="checkbox"/></p>	<p>51A. <u>Interviewer : Show Prompt Card</u> 3 - WHITE:-</p> <p>51B. <u>Interviewer : Show Prompt Card</u> 4 - GREEN:-</p> <p>HERE IS A LIST OF SOME FIELDS OF STUDY. WHICH OF THESE GROUPS BEST DESCRIBES YOUR MAIN FIELD OF STUDY FOR THIS QUALIFICATION?</p> <p>Record code .. <input type="checkbox"/> <input type="checkbox"/></p> <p>None of these (Specify) _____</p> <p>----- <input type="checkbox"/> 99</p>																					
<p>39. WHAT WAS THE YEAR, GRADE OR FORM YOU ATTENDED AT THAT TIME?</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>Form</th> <th>Year/Grade</th> <th></th> </tr> </thead> <tbody> <tr> <td>5</td> <td>12</td> <td>.. <input type="checkbox"/> 1</td> </tr> <tr> <td>4</td> <td>11</td> <td>.. <input type="checkbox"/> 2</td> </tr> <tr> <td>3</td> <td>10</td> <td>.. <input type="checkbox"/> 3</td> </tr> <tr> <td>2</td> <td>9</td> <td>.. <input type="checkbox"/> 4</td> </tr> <tr> <td>1</td> <td>8</td> <td>.. <input type="checkbox"/> 5</td> </tr> <tr> <td>Primary or ungraded</td> <td>..</td> <td>.. <input type="checkbox"/> 6</td> </tr> </tbody> </table>	Form	Year/Grade		5	12	.. <input type="checkbox"/> 1	4	11	.. <input type="checkbox"/> 2	3	10	.. <input type="checkbox"/> 3	2	9	.. <input type="checkbox"/> 4	1	8	.. <input type="checkbox"/> 5	Primary or ungraded <input type="checkbox"/> 6	<p>46. IN THAT TIME DID YOU EVER HAVE A BREAK OF TWELVE MONTHS OR MORE FROM FULL-TIME STUDIES?</p> <p>Yes (Go to Q.48) .. <input type="checkbox"/> 1</p> <p>No .. <input type="checkbox"/> 2</p>	<p>47A. DID YOU OBTAIN ANY QUALIFICATION FROM THESE (years in Q.44/Q.45) YEARS OF STUDY?</p> <p>47B. DID YOU OBTAIN ANY QUALIFICATION FROM THIS STUDY?</p> <p>Yes (Go to Q.50) .. <input type="checkbox"/> 1</p> <p>No (Go to Q.53) .. <input type="checkbox"/> 2</p>
Form	Year/Grade																						
5	12	.. <input type="checkbox"/> 1																					
4	11	.. <input type="checkbox"/> 2																					
3	10	.. <input type="checkbox"/> 3																					
2	9	.. <input type="checkbox"/> 4																					
1	8	.. <input type="checkbox"/> 5																					
Primary or ungraded <input type="checkbox"/> 6																					
<p>40. WAS THIS AT A GOVERNMENT OR STATE SCHOOL, ROMAN CATHOLIC, OR SOME OTHER TYPE OF NON GOVERNMENT SCHOOL?</p> <table border="1" style="width: 100%;"> <tr> <td>Government/State</td> <td>.. <input type="checkbox"/> 1</td> </tr> <tr> <td>Roman Catholic</td> <td>.. <input type="checkbox"/> 2</td> </tr> <tr> <td>Other</td> <td>.. <input type="checkbox"/> 3</td> </tr> </table>	Government/State	.. <input type="checkbox"/> 1	Roman Catholic	.. <input type="checkbox"/> 2	Other	.. <input type="checkbox"/> 3	<p>48. BEFORE THIS BREAK HOW MANY YEARS OF FULL-TIME STUDIES DID YOU DO?</p> <p>Specify years <input type="checkbox"/> <input type="checkbox"/></p>	<p>52. IS THIS THE HIGHEST QUALIFICATION YOU HAVE EVER OBTAINED?</p> <p>Yes (Go to Q.57) .. <input type="checkbox"/> 1</p> <p>No (Go to Q.55) .. <input type="checkbox"/> 2</p>															
Government/State	.. <input type="checkbox"/> 1																						
Roman Catholic	.. <input type="checkbox"/> 2																						
Other	.. <input type="checkbox"/> 3																						
<p>41. WITHIN 12 MONTHS OF LEAVING (THIS) SCHOOL DID YOU START –</p> <p>AN APPRENTICESHIP OR A NURSING COURSE? (Go to Q.53) .. <input type="checkbox"/> 1</p> <p>ANY FULL-TIME STUDIES? <input type="checkbox"/> 2</p> <p>Neither of the above (Go to Q.53) .. <input type="checkbox"/> 3</p>	<p>49. FROM THESE (years in Q.48) YEARS OF STUDY DID YOU OBTAIN ANY QUALIFICATION?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.53) .. <input type="checkbox"/> 2</p>																						
<p>42. ARE YOU CURRENTLY DOING ANY FULL-TIME STUDIES?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.45) .. <input type="checkbox"/> 2</p>	<p>50. <u>Interviewer : Show Prompt Card</u> 5 - YELLOW:-</p> <p>WHICH OF THESE GROUPS BEST DESCRIBES THIS QUALIFICATION?</p> <p>Secondary school course (Go to Q.52) .. <input type="checkbox"/> 1</p>																						
<p>43. HAVE YOU EVER HAD A BREAK OF TWELVE MONTHS OR MORE FROM FULL-TIME STUDIES?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.53) .. <input type="checkbox"/> 2</p>	<p>Trade/Apprenticeship (Go to Q.51A) .. <input type="checkbox"/> 2</p> <p>Certificate/Diploma (Go to Q.51B) .. <input type="checkbox"/> 3</p> <p>Bachelor Degree/Post Grad.Diploma (Go to Q.51B) .. <input type="checkbox"/> 4</p>																						
<p>44. AFTER FIRST LEAVING SCHOOL, FOR HOW MANY YEARS DID YOU DO FULL-TIME STUDIES WITHOUT HAVING A BREAK OF TWELVE MONTHS OR MORE?</p> <p>Specify (Go to Q.47A) <input type="checkbox"/> <input type="checkbox"/></p>	<p>Higher Qualification (Go to Q.51B) .. <input type="checkbox"/> 5</p> <p>Adult Edu/Hobby Course (Go to Q.52) .. <input type="checkbox"/> 6</p> <p>None of these (Specify) _____ (Go to Q.51B) <input type="checkbox"/> 7</p>																						

53. SINCE YOU LEFT FULL-TIME SCHOOL HAVE YOU OBTAINED— ANY SCHOOL QUALIFICATIONS? ANY QUALIFICATION AT ALL? (Go to Q.55) ... Neither of these (Go to Q.58) ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	57. DID YOU COMPLETE THE STUDIES FOR THIS QUALIFICATION THIS YEAR? Yes (Go to Q.60) ... No ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2	63. Interviewer : Show Prompt Card 5 – YELLOW:- WHICH OF THESE GROUPS BEST DESCRIBES THE COURSE YOU DID THIS YEAR? Secondary school course (Go to Q.67) ... Trade/Apprenticeship (Go to Q.64A) ... Certificate/Diploma (Go to Q.64B) ... Bachelor Degree/Post Grad. Diploma (Go to Q.64B) ... Higher Qualification (Go to Q.64B) ... Adult Edu/Hobby Course (Go to Q.67) ... None of these (Specify) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6
54. HAVE YOU OBTAINED ANY OTHER QUALIFICATION SINCE YOU FIRST LEFT SCHOOL? Yes ... No (Go to Q.57) ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2	58. Sequence Guide : . If currently studying full time (1 in Q.42), go to Q.61 Otherwise, go to Q.59	<input type="checkbox"/> 1 <input type="checkbox"/> 2	59. AT ANY TIME THIS YEAR DID YOU DO ANY STUDY AT A TECHNICAL COLLEGE, UNIVERSITY OR OTHER EDUCATIONAL INSTITUTION? Yes ... No (Go to Q.66) ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2
55. Interviewer : Show Prompt Card 5 – YELLOW:- WHICH OF THESE GROUPS BEST DESCRIBES YOUR HIGHEST QUALIFICATION? Secondary school course (Go to Q.57) ... Trade/Apprenticeship (Go to Q.56A) ... Certificate/Diploma (Go to Q.56B) ... Bachelor Degree/Post Grad. Diploma (Go to Q.56B) ... Higher Qualification (Go to Q.56B) ... Adult Edu/Hobby Course (Go to Q.57) ... None of these (Specify) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7	60. DID YOU DO THIS COURSE : FULL TIME, PART TIME OR BY CORRESPONDENCE? Full time ... Part time ... Correspondence ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	64A. Interviewer : Show Prompt Card 3 – WHITE:- 64B. Interviewer : Show Prompt Card 4 – GREEN:- (HERE IS A LIST OF SOME FIELDS OF STUDY). WHICH OF THESE GROUPS BEST DESCRIBES YOUR MAIN FIELD OF STUDY FOR THIS COURSE? Record code ... Don't know/none of these (Specify) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 99
56A. Interviewer : Show Prompt Card 3 – WHITE:- 56B. Interviewer : Show Prompt Card 4 – GREEN:- (HERE IS A LIST OF SOME FIELDS OF STUDY). WHICH OF THESE GROUPS BEST DESCRIBES YOUR MAIN FIELD OF STUDY FOR YOUR HIGHEST QUALIFICATION? Record code ... Don't know/none of these (Specify) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 99	61. WHICH DID YOU ATTEND THIS YEAR : A TECHNICAL COLLEGE, A COLLEGE OF ADVANCED EDUCATION, UNIVERSITY OR SOME OTHER PLACE? Technical or Further Edu College, TAFE ... CAE, Instit. of Tech. Teachers College ... University ... Other (Specify FULL name/State) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	65. Go to Q.67 66. AT ANY TIME THIS YEAR DID YOU DO ANY TYPE OF COURSE AT ALL, SUCH AS A HOBBY COURSE, A COURSE AT WORK, AN EVENING OR CORRESPONDENCE COURSE? Yes ... No (Go to Q.69) ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2
62. Sequence Guide : . If completed qualification this year (1 in Q.57), go to Q.67 . Otherwise, go to Q.63	<input type="checkbox"/> 1 <input type="checkbox"/> 2	67. DID YOU DO THIS COURSE TO HELP YOU IN GETTING OR DOING WORK, OR FOR SOME OTHER REASON? Work reasons ... Other ...	<input type="checkbox"/> 1 <input type="checkbox"/> 2	68. Go to Q.79, page 7	

69. HAD YOU PLANNED TO DO ANY TYPE OF COURSE THIS YEAR? Yes <input type="checkbox"/> 1 No (<i>Go to Q. 74</i>) <input type="checkbox"/> 2	72. WAS THE COURSE YOU PLANNED TO DO: AT A TECHNICAL COLLEGE, A COLLEGE OF ADVANCED EDUCATION, UNIVERSITY OR SOME OTHER PLACE? Technical or Further Edu College, TAFE .. <input type="checkbox"/> 1 CAE, Instit. of Tech. Teachers College .. <input type="checkbox"/> 2 University .. <input type="checkbox"/> 3 Other .. <input type="checkbox"/> 4 Don't know/unsure .. <input type="checkbox"/> 5	76. DID YOU DO ANY COURSE OF STUDY, AT ALL, THIS YEAR? Yes <input type="checkbox"/> 1 No (<i>Go to Q. 79, page 7</i>) <input type="checkbox"/> 2
70. <i>Interviewer : Show Prompt Card 5 - YELLOW:-</i> WHICH OF THESE GROUPS BEST DESCRIBES THE COURSE YOU PLANNED TO DO? Secondary school course (<i>Go to Q. 72</i>) .. <input type="checkbox"/> 1 Trade/Apprenticeship (<i>Go to Q. 71A</i>) .. <input type="checkbox"/> 2 Certificate/Diploma (<i>Go to Q. 71B</i>) .. <input type="checkbox"/> 3 Bachelor Degree/Post Grad.Diploma (<i>Go to Q. 71B</i>) .. <input type="checkbox"/> 4 Higher Qualification (<i>Go to Q. 71B</i>) .. <input type="checkbox"/> 5 Adult Edu/Hobby Course (<i>Go to Q. 72</i>) .. <input type="checkbox"/> 6 None of these (<i>Specify</i>) _____ ----- ----- <i>(Go to Q. 71B)</i> <input type="checkbox"/> 7	73. WHY DIDN'T YOU DO THE COURSE THIS YEAR? <u>Course Barriers :</u> e.g. Cost; location; timing; course not on; already full .. <input type="checkbox"/> 1 <u>Personal Barriers :</u> e.g. too busy; sickness; family commitments; child care .. <input type="checkbox"/> 2 <u>Other (Specify)</u> _____ ----- ----- <input type="checkbox"/> 3	77. <i>Interviewer : Show Prompt Card 5 - YELLOW:-</i> WHICH OF THESE GROUPS BEST DESCRIBES THE COURSE YOU DID? Secondary school course .. <input type="checkbox"/> 1 Trade/Apprenticeship .. <input type="checkbox"/> 2 Certificate/Diploma .. <input type="checkbox"/> 3 Bachelor Degree/Post Grad. Diploma .. <input type="checkbox"/> 4 Higher Qualification .. <input type="checkbox"/> 5 Adult Edu/Hobby Course .. <input type="checkbox"/> 6 None of these (<i>Specify</i>) _____ ----- ----- <input type="checkbox"/> 7
71A. <i>Interviewer : Show Prompt Card 3 - WHITE:-</i>	74. WILL YOU UNDERTAKE A COURSE DURING 1980? Yes <input type="checkbox"/> 1 Probably <input type="checkbox"/> 2 May be/it depends/ don't know <input type="checkbox"/> 3 No <input type="checkbox"/> 4	78. <i>Go to Q. 79, page 7</i>
71B. <i>Interviewer: Show Prompt Card 4 - GREEN:-</i> (HERE IS A LIST OF <u>SOME</u> FIELDS OF STUDY). WHICH OF THESE GROUPS BEST DESCRIBES THE MAIN FIELD OF STUDY YOU PLANNED TO DO? Record code <input type="checkbox"/> <input type="checkbox"/> Don't know/none of these (<i>Specify</i>) _____ ----- ----- <input type="checkbox"/> 99	75. <i>Go to Q. 79, page 7</i>	

<p>79. <u>Sequence Guide</u> :</p> <ul style="list-style-type: none"> . If aged 14, no more questions .. <input type="checkbox"/> 1 . Otherwise, go to Q.80 .. <input type="checkbox"/> 2 	<p>82. IN WHAT MONTH DID YOU ARRIVE IN AUSTRALIA?</p> <p><u>1978</u></p> <p>Before July 1978 (Go to Q.85). . . <input type="checkbox"/> 01</p> <p>July <input type="checkbox"/> 02</p> <p>August <input type="checkbox"/> 03</p> <p>September <input type="checkbox"/> 04</p> <p>October <input type="checkbox"/> 05</p> <p>November <input type="checkbox"/> 06</p> <p>December <input type="checkbox"/> 07</p> <p><u>1979</u></p> <p>January <input type="checkbox"/> 08</p> <p>February <input type="checkbox"/> 09</p> <p>March <input type="checkbox"/> 10</p> <p>April <input type="checkbox"/> 11</p> <p>May <input type="checkbox"/> 12</p> <p>June <input type="checkbox"/> 13</p> <p>After 30th June 1979 (No more questions) <input type="checkbox"/> 14</p>	<p>85. THE QUESTIONS I AM NOW GOING TO ASK YOU REFER TO THE LAST FINANCIAL YEAR – THAT IS, THE PERIOD 1 JULY 1978 TO 30TH JUNE 1979.</p> <p>86. <u>Interviewer</u> :</p> <p><i>Hand respondent calendar, show present month and explain.</i></p>
<p>80. IN WHICH COUNTRY WERE YOU BORN?</p> <ul style="list-style-type: none"> Australia (Go to Q.85) <input type="checkbox"/> 1 UK and Ireland <input type="checkbox"/> 2 Canada, South Africa <input type="checkbox"/> 3 USA <input type="checkbox"/> 4 Italy <input type="checkbox"/> 5 Greece <input type="checkbox"/> 6 Yugoslavia <input type="checkbox"/> 7 New Zealand <input type="checkbox"/> 8 Germany <input type="checkbox"/> 9 		<p>87. WERE YOU AWAY FROM AUSTRALIA AT ANY TIME DURING THIS PERIOD?</p> <p>Yes <input type="checkbox"/> 1</p> <p>No (Go to Q.92) <input type="checkbox"/> 2</p>
<p>81. IN WHAT YEAR DID YOU ARRIVE IN AUSTRALIA?</p> <ul style="list-style-type: none"> Before 1978 specify (Go to Q.85) <input type="checkbox"/> 78 1978 <input type="checkbox"/> 78 1979 <input type="checkbox"/> 79 	<p>83. <u>Interviewer</u> :</p> <p><i>Cross out months before respondent arrived in Australia (Q.82) on calendar</i></p> <p>THE QUESTIONS I AM NOW GOING TO ASK YOU REFER TO THE PERIOD BETWEEN (month & year of arrival in Q.82) AND 30TH JUNE 1979 ; THAT IS THE PERIOD SHOWN ON THIS CALENDAR.</p>	<p>88. HOW MANY WEEKS WERE YOU AWAY FROM AUSTRALIA DURING THIS PERIOD?</p> <p>1-12 weeks <input type="checkbox"/> 1</p> <p>13-25 weeks <input type="checkbox"/> 2</p> <p>26-51 weeks <input type="checkbox"/> 3</p> <p>52 weeks (No more questions) <input type="checkbox"/> 4</p>
	<p>84. Go to Q.86</p>	<p>89. DURING THESE (weeks in Q.88) WEEKS, DID YOU WORK OVERSEAS?</p> <p>Yes <input type="checkbox"/> 1</p> <p>No (Go to Q.92) <input type="checkbox"/> 2</p>
		<p>90. WAS THIS WORK FOR YOUR AUSTRALIAN JOB OR BUSINESS?</p> <p>Yes (Go to Q.92) <input type="checkbox"/> 1</p> <p>No <input type="checkbox"/> 2</p> <p>91. IN THE FOLLOWING QUESTIONS I AM NOT INTERESTED IN DETAILS OF JOBS YOU HAD OUTSIDE AUSTRALIA.</p>

<p>110. HOW MUCH TAX WAS PAYABLE ON YOUR INCOME FOR THIS PERIOD? THE INFORMATION I NEED IS:</p> <ul style="list-style-type: none"> - ITEM 'A' IN THE SECOND COLUMN OF THE TAX ASSESSMENT FORM; \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> AND - ITEM 'G' IN THE THIRD COLUMN, Nil ... <input type="checkbox"/> 99999 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 	<p>119. HOW MUCH TAX WAS PAYABLE ON YOUR INCOME FOR THIS PERIOD?</p> <p>Don't know (Go to Q.128) <input type="checkbox"/> 99999 No Records consulted – estimate given, enter amount in Q.126 <input type="checkbox"/> 99998 Otherwise, enter amount \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>128. AS YOU DON'T KNOW EXACTLY HOW MUCH TAX YOU PAID, COULD YOU GIVE ME THE BEST ESTIMATE YOU CAN?</p> <p>Don't know ... <input type="checkbox"/> 1 Otherwise, enter amount in Q.130 ... <input type="checkbox"/> 2</p>
<p>111. Go to Q.132</p>	<p>112. WHAT WAS THE AMOUNT OF TAX DEDUCTED FROM YOUR EARNINGS FOR THIS PERIOD?</p> <p>Enter total tax:— <i>(Either Form S showing all jobs, or sum of all Group Certificates and Tax stamps)</i> \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>120. DID YOU RECEIVE A TAX REFUND OR DO YOU EXPECT TO RECEIVE A REFUND?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.123) ... <input type="checkbox"/> 2 Don't know (Go to Q.132) <input type="checkbox"/> 3</p>
<p>113. DID YOU RECEIVE A TAX REFUND OR DO YOU EXPECT TO RECEIVE A REFUND?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.115) ... <input type="checkbox"/> 2 Don't know (Go to Q.132) <input type="checkbox"/> 3</p>	<p>121. DID YOU TAKE THIS REFUND INTO ACCOUNT WHEN YOU STATED THE AMOUNT OF TAX YOU PAID?</p> <p>Yes (Go to Q.132) ... <input type="checkbox"/> 1 No ... <input type="checkbox"/> 2</p>	<p>130. Interviewer: Enter amount Nil ... <input type="checkbox"/> 99999 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<p>114. HOW MUCH TAX REFUND DID YOU RECEIVE (OR EXPECT TO RECEIVE)?</p> <p>Don't know (Go to Q.132) <input type="checkbox"/> 1 Otherwise, enter amount in Q.117 ... <input type="checkbox"/> 2</p>	<p>122. HOW MUCH TAX REFUND DID YOU RECEIVE (OR EXPECT TO RECEIVE?)</p> <p>Don't know (Go to Q.132) <input type="checkbox"/> 1 Otherwise, enter amount in Q.126 ... <input type="checkbox"/> 2</p>	
<p>115. DID YOU PAY OR DO YOU EXPECT TO PAY ANY EXTRA TAX?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.132) ... <input type="checkbox"/> 2</p>	<p>123. DID YOU PAY OR DO YOU EXPECT TO PAY ANY EXTRA TAX?</p> <p>Yes ... <input type="checkbox"/> 1 No (Go to Q.132) ... <input type="checkbox"/> 2</p>	<p>124. DID YOU INCLUDE THIS EXTRA TAX IN THE (\$ in Q.119) TAX YOU MENTIONED BEFORE?</p> <p>Yes (Go to Q.132) ... <input type="checkbox"/> 1 No ... <input type="checkbox"/> 2</p>
<p>116. HOW MUCH EXTRA TAX DID YOU PAY (OR EXPECT TO PAY)?</p> <p>Don't know (Go to Q.132) <input type="checkbox"/> 1 Otherwise, enter amount in Q.117 ... <input type="checkbox"/> 2</p>	<p>125. HOW MUCH EXTRA TAX DID YOU PAY (OR EXPECT TO PAY)?</p> <p>Don't know (Go to Q.132) <input type="checkbox"/> 1 Otherwise, enter amount in Q.126 ... <input type="checkbox"/> 2</p>	<p>126. Interviewer : Enter amount Nil ... <input type="checkbox"/> 99999 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<p>117. Interviewer : Enter amount Nil ... <input type="checkbox"/> 99999 \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>118. Go to Q.132</p>	<p>127. Go to Q.132</p>	

<p>132. <u>Sequence Guide</u> :</p> <ul style="list-style-type: none"> . If in a partnership (1 in Q.93), go to Q.133 .. <input type="checkbox"/> 1 . Otherwise, go to Q.137 <input type="checkbox"/> 2 	<p>137. <u>Sequence Guide</u> :</p> <ul style="list-style-type: none"> . If had own business or farm (1 in Q.94), go to Q.138 .. <input type="checkbox"/> 1 . Otherwise, go to Q.142 <input type="checkbox"/> 2 	<p>142. <u>Sequence Guide</u> :</p> <ul style="list-style-type: none"> . If worked for wages or salary (1 in Q.92), go to Q.143 .. <input type="checkbox"/> 1 . Otherwise, go to Q.149 .. <input type="checkbox"/> 2
<p>133. DURING THE PERIOD SHOWN, WHAT WAS YOUR INCOME FROM YOUR PARTNERSHIP BEFORE TAX BUT AFTER DEDUCTING EXPENSES?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.135 .. <input type="checkbox"/> 2</p>	<p>138. DURING THE PERIOD SHOWN, WHAT WAS YOUR INCOME FROM YOUR BUSINESS (OR FARM) BEFORE TAX BUT AFTER DEDUCTING BUSINESS EXPENSES?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.140 .. <input type="checkbox"/> 2</p>	<p>143. DURING THE PERIOD SHOWN WHAT WAS YOUR INCOME FROM ALL WAGE AND SALARY JOBS BEFORE ANY TAX WAS DEDUCTED?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.147 .. <input type="checkbox"/> 2</p>
<p>134. AS YOU DON'T KNOW EXACTLY HOW MUCH THAT INCOME WAS, COULD YOU GIVE ME THE BEST ESTIMATE YOU CAN?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.135 .. <input type="checkbox"/> 2</p>	<p>139. AS YOU DON'T KNOW EXACTLY HOW MUCH THAT INCOME WAS, COULD YOU GIVE ME THE BEST ESTIMATE YOU CAN?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.140 .. <input type="checkbox"/> 2</p>	<p>144. AS YOU DON'T KNOW EXACTLY HOW MUCH YOU EARNED, COULD YOU GIVE ME THE BEST ESTIMATE YOU CAN?</p> <p>Don't know .. <input type="checkbox"/> 1</p> <p>Otherwise, enter amount in Q.147 .. <input type="checkbox"/> 2</p>
<p>135. IN THE PREVIOUS FINANCIAL YEAR, JULY 1977 TO JUNE 1978, WHAT WAS YOUR INCOME FROM PARTNERSHIPS BEFORE TAX BUT AFTER DEDUCTING BUSINESS EXPENSES?</p> <p>Enter amount</p> <p>Nil/Negative <input type="checkbox"/> 99999 \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>140. IN THE PREVIOUS FINANCIAL YEAR, JULY 1977 TO JUNE 1978, WHAT WAS YOUR INCOME FROM YOUR BUSINESS OR FARM BEFORE TAX BUT AFTER DEDUCTING BUSINESS EXPENSES?</p> <p>Enter amount</p> <p>Nil/negative <input type="checkbox"/> 99999 \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>145. ARE YOU CURRENTLY A WAGE OR SALARY EARNER?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.149) .. <input type="checkbox"/> 2</p> <p>146. HOW MANY WEEKS DID YOUR LAST PAY COVER?</p> <p>Weeks .. <input type="checkbox"/> <input type="checkbox"/></p>
		<p>147. WHAT WAS THE AMOUNT OF YOUR LAST PAY, BEFORE TAX, FROM YOUR PRESENT JOB?</p> <p>Enter amount</p> <p>\$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>

<p>149. DURING THE PERIOD SHOWN DID YOU RECEIVE ANY INTEREST FROM ANY BUILDING SOCIETIES, BANKS, OR CREDIT UNIONS?</p> <p>Yes ... <input type="checkbox"/> 1 No (<i>Go to Q.154</i>) ... <input type="checkbox"/> 2</p>	<p>154. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If worked full time for whole year (1 in Q.105), go to Q.169 . Otherwise, go to Q.155 	<p>164. AT ANY TIME DURING THE PERIOD SHOWN WERE YOU EVER PAID SICKNESS BENEFITS BY THE DEPT. OF SOCIAL SECURITY?</p> <p>Yes ... <input type="checkbox"/> 1 No (<i>Go to Q.169</i>) ... <input type="checkbox"/> 2</p>
<p>150. WERE ANY OF THESE ACCOUNTS JOINT ACCOUNTS?</p> <p>Yes (<i>Go to Q.153</i>) ... <input type="checkbox"/> 1 No ... <input type="checkbox"/> 2</p>	<p>155. DURING THE PERIOD SHOWN DID YOU RECEIVE ANY WORKERS' COMPENSATION?</p> <p>Yes ... <input type="checkbox"/> 1 No (<i>Go to Q.158</i>) ... <input type="checkbox"/> 2</p>	<p>165. FOR HOW MANY WEEKS DURING THE PERIOD DID YOU RECEIVE SICKNESS BENEFITS?</p> <p>Weeks</p>
<p>151. WHAT WAS THE TOTAL AMOUNT OF INTEREST RECEIVED DURING THAT PERIOD –</p> <p>FROM BUILDING SOCIETIES? ----- FROM BANKS? ----- FROM CREDIT UNIONS? -----</p> <p>Enter total \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Nil/Don't know <input type="checkbox"/> 99999</p>	<p>156. FOR HOW MANY WEEKS DURING THE PERIOD WERE YOU ON WORKERS' COMPENSATION?</p> <p>Weeks ... <input type="checkbox"/> <input type="checkbox"/></p> <p>157. HOW MUCH DID YOU RECEIVE FOR THESE (weeks in Q.156) WEEKS, EXCLUDING ANY LUMP SUM PAYMENTS?</p> <p>Don't know ... <input type="checkbox"/> 99999 Lump Sum Only <input type="checkbox"/> 9998 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>166. HOW MUCH WAS THE LAST PAYMENT YOU RECEIVED?</p> <p>Don't know (<i>Go to Q.168</i>) ... <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>152. <i>Go to Q.154</i></p> <p>153. ONLY INCLUDING YOUR SHARE OF THE INTEREST FROM JOINT ACCOUNTS, WHAT WAS THE TOTAL AMOUNT OF INTEREST RECEIVED DURING THE PERIOD –</p> <p>FROM <u>ALL</u> BUILDING SOCIETIES ACCOUNTS? ----- FROM <u>ALL</u> BANK ACCOUNTS? ----- FROM <u>ALL</u> CREDIT UNION ACCOUNTS? -----</p> <p>Enter total \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Nil/Don't know <input type="checkbox"/> 99999</p>	<p>158. AT ANY TIME DURING THE PERIOD SHOWN DID YOU RECEIVE UNEMPLOYMENT BENEFITS?</p> <p>Yes ... <input type="checkbox"/> 1 No (<i>Go to Q.164</i>) ... <input type="checkbox"/> 2</p> <p>159. WERE YOU UNEMPLOYED MORE THAN ONCE DURING THE PERIOD?</p> <p>Yes ... <input type="checkbox"/> No ... <input type="checkbox"/></p> <p>160. FOR HOW MANY WEEKS DURING THE PERIOD DID YOU RECEIVE UNEMPLOYMENT BENEFITS?</p> <p>Weeks ... <input type="checkbox"/> <input type="checkbox"/></p> <p>161. HOW MUCH WAS THE LAST PAYMENT YOU RECEIVED?</p> <p>Don't know (<i>Go to Q.163</i>) ... <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>167. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks (<i>Go to Q.169</i>)</p> <p>168. WHAT WAS THE TOTAL AMOUNT YOU RECEIVED FROM SICKNESS BENEFITS FOR THESE (weeks in Q.165) WEEKS?</p> <p>Don't know ... <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
	<p>162. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks (<i>Go to Q.164</i>)</p> <p>163. WHAT WAS THE TOTAL AMOUNT OF MONEY YOU RECEIVED FROM UNEMPLOYMENT BENEFITS FOR THOSE (weeks in Q.160) WEEKS?</p> <p>Don't know ... <input type="checkbox"/> 9999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	

<p>169. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If respondent or spouse has any children 25 or under, go to Q.170 .. <input type="checkbox"/> 1 . Otherwise, go to Q.180 .. <input type="checkbox"/> 2 	<p>176. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If female respondent whose spouse is on HF/SDF go to Q.180 .. <input type="checkbox"/> 1 . Otherwise, go to Q.177 .. <input type="checkbox"/> 2 	<p>180. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If male 65 years or over, go to Q.185 .. <input type="checkbox"/> 1 . If female 60 years or over, go to Q.185 .. <input type="checkbox"/> 2 . Otherwise, go to Q.181 .. <input type="checkbox"/> 3
<p>170. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If male respondent whose spouse is on HF/SDF go to Q.177 .. <input type="checkbox"/> 1 . Otherwise, go to Q.171 .. <input type="checkbox"/> 2 	<p>177. DURING THE PERIOD SHOWN DID YOUR FAMILY RECEIVE ANY MONEY TO ASSIST WITH THE EDUCATION OF YOUR CHILD(REN) AT PRIMARY OR SECONDARY SCHOOL?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.180) .. <input type="checkbox"/> 2</p>	<p>181. DURING THIS PERIOD DID YOU RECEIVE ANY MONEY IN THE FORM OF A SCHOLARSHIP OR STUDENT ASSISTANCE FOR YOUR <u>OWN</u> STUDY?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.194) .. <input type="checkbox"/> 2</p>
<p>171. DURING THE PERIOD SHOWN DID YOU RECEIVE ANY PAYMENTS FOR FAMILY ALLOWANCE, STUDENT ALLOWANCE OR CHILD ENDOWMENT?</p> <p>Yes .. <input type="checkbox"/> 1</p> <p>No (Go to Q.176) .. <input type="checkbox"/> 2</p>	<p>178. WHAT WAS THE TOTAL AMOUNT OF ASSISTANCE YOU RECEIVED DURING THE PERIOD?</p> <p>Don't know (Go to Q.180) .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>182. WHAT WAS THE TOTAL AMOUNT OF ASSISTANCE YOU RECEIVED DURING THE PERIOD?</p> <p>Don't know (Go to Q.194) .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>172. FOR HOW MANY DEPENDANTS DID YOU RECEIVE THIS ALLOWANCE?</p> <p>Dependants .. <input type="checkbox"/> <input type="checkbox"/></p> <p><i>Interviewer : If different number over year, record largest number.</i></p>	<p>179. HOW MUCH OF THIS ASSISTANCE WAS FROM THE GOVERNMENT?</p> <p>All .. <input type="checkbox"/> 9999</p> <p>Noné .. <input type="checkbox"/> 9998</p> <p>Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>183. HOW MUCH OF THIS ASSISTANCE WAS FROM THE GOVERNMENT?</p> <p>All .. <input type="checkbox"/> 9999</p> <p>None .. <input type="checkbox"/> 9998</p> <p>Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>173. DID YOU RECEIVE THIS ALLOWANCE FOR (THIS CHILD/ ALL OF THESE CHILDREN) FOR THE WHOLE PERIOD SHOWN ON THE CALENDAR?</p> <p>Yes (Go to Q.176) .. <input type="checkbox"/> 1</p> <p>No .. <input type="checkbox"/> 2</p>	<p>184. Go to Q.194</p>	
<p>174. FOR HOW MANY MONTHS DID YOU RECEIVE PAYMENTS FOR (No. in Q.172) CHILDREN?</p> <p>Months .. <input type="checkbox"/> <input type="checkbox"/></p>		
<p>175. FOR HOW MANY CHILDREN DID YOU RECEIVE PAYMENT FOR THE REST OF THE PERIOD?</p> <p>No. of children .. <input type="checkbox"/> <input type="checkbox"/></p> <p><i>Interviewer : If different numbers over time, record largest number.</i></p>		

<p>185. DO YOU CURRENTLY RECEIVE ANY AGE PENSION?</p> <p>Yes .. <input type="checkbox"/> 1 No (<i>Go to Q.194</i>) .. <input type="checkbox"/> 2</p>	<p>194. DO YOU CURRENTLY RECEIVE ANY SERVICE PENSION OR DISABILITY PENSION FROM THE DEPARTMENT OF VETERANS' AFFAIRS OR REPATRIATION?</p> <p>Yes .. <input type="checkbox"/> 1 No (<i>Go to Q.206</i>) .. <input type="checkbox"/> 2</p>	<p>203. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks <input type="checkbox"/> <input type="checkbox"/></p>
<p>186. DID YOU START RECEIVING THIS PENSION BEFORE 30 JUNE 1978?</p> <p>Yes (<i>Go to Q.188</i>) .. <input type="checkbox"/> 1 No .. <input type="checkbox"/> 2</p>	<p>195. DID YOU START RECEIVING THIS PENSION BEFORE 30 JUNE 1978?</p> <p>Yes (<i>Go to Q.197</i>) .. <input type="checkbox"/> 1 No .. <input type="checkbox"/> 2</p>	<p>204. <i>Go to Q.206</i></p>
<p>187. WHEN DID YOU FIRST START RECEIVING THIS PENSION?</p> <p>After 30 June <u>1979</u> <input type="checkbox"/> 13 Otherwise, specify month .. <input type="checkbox"/> <input type="checkbox"/></p>	<p>196. WHEN DID YOU FIRST START RECEIVING THIS PENSION?</p> <p>After 30 June <u>1979</u> <input type="checkbox"/> 13 Otherwise, specify month .. <input type="checkbox"/> <input type="checkbox"/></p>	<p>205. AS YOU DON'T KNOW EXACTLY HOW MUCH YOU RECEIVE, COULD YOU GIVE ME THE BEST ESTIMATE YOU CAN OF THE AMOUNT YOU (AND YOUR HUSBAND/WIFE) RECEIVE EACH FORTNIGHT?</p> <p>Don't know .. <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>188. <u>Sequence Guide</u>:</p> <ul style="list-style-type: none"> . If spouse is on HF/SDF, go to Q.189 <input type="checkbox"/> 1 . Otherwise, go to Q.192 <input type="checkbox"/> 2 	<p>197. <u>Sequence Guide</u>:</p> <ul style="list-style-type: none"> . If spouse is on HF/SDF go to Q.198 .. <input type="checkbox"/> 1 . Otherwise, go to Q.202 <input type="checkbox"/> 2 	
<p>189. DOES YOUR (HUSBAND/WIFE) ALSO RECEIVE AN AGE PENSION?</p> <p>Yes .. <input type="checkbox"/> 1 No (<i>Go to Q.192</i>) .. <input type="checkbox"/> 2</p>	<p>198. DOES YOUR (HUSBAND/WIFE) ALSO RECEIVE A (SERVICE OR) DISABILITY PENSION?</p> <p>Yes .. <input type="checkbox"/> 1 No (<i>Go to Q.202</i>) .. <input type="checkbox"/> 2</p>	
<p>190. WHAT IS THE COMBINED AMOUNT OF AGE PENSION THAT YOU <u>AND</u> YOUR (HUSBAND/WIFE) CURRENTLY RECEIVE EACH FORTNIGHT?</p> <p>Don't know .. <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>199. WHAT WAS THE COMBINED AMOUNT OF THE LAST PAYMENT YOU AND YOUR (HUSBAND/WIFE) RECEIVED?</p> <p>Don't know (<i>Go to Q.205</i>) .. <input type="checkbox"/> 9999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	
<p>191. <i>Go to Q.193</i></p>	<p>200. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks <input type="checkbox"/> <input type="checkbox"/></p>	
<p>192. HOW MUCH DO YOU CURRENTLY RECEIVE EACH FORTNIGHT?</p> <p>Don't know .. <input type="checkbox"/> 999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>201. <i>Go to Q.206</i></p>	
<p>193. DO YOU RECEIVE ANY DISABILITY PENSION FROM THE DEPARTMENT OF VETERANS' AFFAIRS OR REPATRIATION?</p> <p>Yes (<i>Go to Q.195</i>) .. <input type="checkbox"/> 1 No (<i>Go to Q.206</i>) .. <input type="checkbox"/> 2</p>	<p>202. HOW MUCH WAS THE LAST PAYMENT YOU RECEIVED?</p> <p>Don't know (<i>Go to Q.205</i>) .. <input type="checkbox"/> 9999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	

<p>206. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If female, show Prompt Card 1B - PINK . If male, show Prompt Card 2B - BLUE 	<p>209. FOR HOW MANY WEEKS DURING THE PERIOD DID YOU RECEIVE (1st Benefit)?</p> <p>Weeks <input type="text"/> <input type="text"/></p>	<p>220. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If box 5 ticked in Q.207, go to Q.221 .. . Otherwise, go to Q.222 .. 																					
<p>207. DURING THE PERIOD SHOWN, WHICH OF THESE PAYMENTS, IF ANY, DID YOU RECEIVE?</p> <table border="0"> <tr> <td>War Widows Pension (a)</td> <td><input type="checkbox"/></td> <td>1</td> </tr> <tr> <td>Widows Pension (b)</td> <td><input type="checkbox"/></td> <td>2</td> </tr> <tr> <td>Invalid Pension (c)</td> <td><input type="checkbox"/></td> <td>3</td> </tr> <tr> <td>Supporting Mothers/ Fathers Benefit (d)</td> <td><input type="checkbox"/></td> <td>4</td> </tr> <tr> <td>Maintenance/Alimony (e)</td> <td><input type="checkbox"/></td> <td>5</td> </tr> <tr> <td>Any Govt. Benefit not already mentioned (f)</td> <td><input type="checkbox"/></td> <td>6</td> </tr> <tr> <td>None (Go to Q.225) (g)</td> <td><input type="checkbox"/></td> <td>7</td> </tr> </table>	War Widows Pension (a)	<input type="checkbox"/>	1	Widows Pension (b)	<input type="checkbox"/>	2	Invalid Pension (c)	<input type="checkbox"/>	3	Supporting Mothers/ Fathers Benefit (d)	<input type="checkbox"/>	4	Maintenance/Alimony (e)	<input type="checkbox"/>	5	Any Govt. Benefit not already mentioned (f)	<input type="checkbox"/>	6	None (Go to Q.225) (g)	<input type="checkbox"/>	7	<p>210. WHAT WAS THE TOTAL AMOUNT YOU RECEIVED FROM (1st benefit) DURING THE PERIOD?</p> <p>Don't know (Go to Q.212) .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>221. WHAT WAS THE TOTAL AMOUNT OF MAINTENANCE OR ALIMONY THAT YOU RECEIVED DURING THE PERIOD SHOWN?</p> <p>Don't know .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/> <input type="text"/></p>
War Widows Pension (a)	<input type="checkbox"/>	1																					
Widows Pension (b)	<input type="checkbox"/>	2																					
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Any Govt. Benefit not already mentioned (f)	<input type="checkbox"/>	6																					
None (Go to Q.225) (g)	<input type="checkbox"/>	7																					
<p>208. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If any of boxes 1,2,3,4 ticked, go to Q.209, and ask for 1st benefit ticked .. . If box 5 ticked, go to Q.221 .. . If only box 6 ticked, go to Q.223 .. 	<p>211. Go to Q.214</p> <p>212. HOW MUCH WAS THE LAST PAYMENT YOU RECEIVED?</p> <p>Don't know (Go to Q.214) .. <input type="checkbox"/> 999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/></p>	<p>222. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If box 6 ticked in Q.207, go to Q.223 .. . Otherwise, go to Q.225 .. 																					
	<p>213. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks <input type="text"/> <input type="text"/></p> <p>214. <u>Sequence Guide :</u></p> <ul style="list-style-type: none"> . If only one of boxes 1,2,3,4, ticked in Q.207, go to Q.220 .. <input type="checkbox"/> 1 . Otherwise, go to Q.215 for 2nd benefit ticked .. <input type="checkbox"/> 2 	<p>223. WHAT WAS THIS OTHER BENEFIT? (Specify) -----</p> <p>-----</p> <p>224. HOW MUCH DID YOU RECEIVE IN TOTAL FROM (THIS BENEFIT/ ALL THOSE BENEFITS) DURING THE PERIOD?</p> <p>Don't know .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/> <input type="text"/></p>																					
		<p>215. FOR HOW MANY WEEKS DURING THE PERIOD DID YOU RECEIVE (2nd benefit)?</p> <p>Weeks <input type="text"/> <input type="text"/></p> <p>216. WHAT WAS THE TOTAL AMOUNT YOU RECEIVED FROM (2nd benefit) DURING THE PERIOD?</p> <p>Don't know (Go to Q.218) .. <input type="checkbox"/> 9999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/> <input type="text"/></p>																					
			<p>217. Go to Q.220</p> <p>218. HOW MUCH WAS THE LAST PAYMENT YOU RECEIVED ?</p> <p>Don't know (Go to Q.220) .. <input type="checkbox"/> 999</p> <p>Otherwise, enter amount \$ <input type="text"/> <input type="text"/></p>																				
				<p>219. HOW MANY WEEKS DID THAT PAYMENT COVER?</p> <p>Weeks <input type="text"/> <input type="text"/></p>																			

<p>225. DURING THE PERIOD SHOWN DID YOU RECEIVE ANY INCOME FROM SUPERANNUATION?</p> <p>Yes <input type="checkbox"/> 1 No (<i>Go to Q.227</i>) .. <input type="checkbox"/> 2</p>	<p>227. DID YOU RECEIVE ANY INCOME FROM DIVIDENDS, BONDS, ROYALTIES, TRUSTS OR DEBENTURES?</p> <p>Yes <input type="checkbox"/> 1 No (<i>Go to Q.229</i>) .. <input type="checkbox"/> 2</p>	<p>231. DID YOU RECEIVE INCOME FROM ANY OTHER SOURCE AT ALL DURING THE PERIOD SHOWN?</p> <p>Yes <input type="checkbox"/> 1 No (<i>No more questions</i>) .. <input type="checkbox"/> 2</p>
<p>226. HOW MUCH DID YOU RECEIVE DURING THE PERIOD, EXCLUDING ANY LUMP SUM PAYMENTS?</p> <p>Don't know <input type="checkbox"/> 99999 Lump Sum Only .. <input type="checkbox"/> 99998 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>228. WHAT WAS THE TOTAL AMOUNT YOU RECEIVED FROM THESE SOURCES?</p> <p>Don't know <input type="checkbox"/> 99999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	<p>232. WHAT WAS THE SOURCE OF THIS INCOME?</p> <p>Regular e.g. Allowances from absent parents .. <input type="checkbox"/> 1 Only Lump Sums e.g. Gambling wins, gifts, inheritance, sale of assets (<i>No more questions</i>) .. <input type="checkbox"/> 2</p>
	<p>229. DID YOU RECEIVE ANY INCOME FROM RENT DURING THE PERIOD SHOWN?</p> <p>Yes <input type="checkbox"/> 1 No (<i>Go to Q.231</i>) .. <input type="checkbox"/> 2</p>	<p>233. HOW MUCH DID YOU RECEIVE IN TOTAL FROM (<i>Source in Q.232</i>) DURING THE PERIOD?</p> <p>Don't know <input type="checkbox"/> 99999 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
	<p>230. AFTER BUSINESS EXPENSES WERE DEDUCTED WHAT WAS THE TOTAL AMOUNT OF INCOME YOU RECEIVED FROM RENT?</p> <p>Nil/Negative .. <input type="checkbox"/> 99999 Don't know .. <input type="checkbox"/> 99998 Otherwise, enter amount \$ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	

